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PTO/SB/30 (10/2001)

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## REQUEST FOR CONTINUED EXAMINATION (RCE)

**TRANSMITTAL** 

Address to: Commissioner for Patents Box RCE Washington, DC 20231

Application Number	09/709,781	
Filing Date	November 3, 2000	
First Named Inventor	Humpleman, et al. ECE	MED
Art Unit	2176 NOV 2	5 2003
Examiner Name	W. Bashore Technology C	_
Attorney Docket Number	SAM1.PAU.14A	enjer 2100

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8,

1. Submission re	quired under 37 CFR	R §1.114				
a. 🛛 Previously s	ubmitted	· ·-				
i. 🛛 Consider th	e amendment(s)/reply und	der 37 CFR §1.116 previous	ly filed on	October 16, 2003		
(Any unent	ered amendment(s) referre	ed to above will be entered).				
ii. 🛘 Consider	the arguments in the	Appeal Brief or Reply	Brief pre	viously filed on		
iii. 🔲 Other		,	<del></del>			
b. 🛛 Enclosed						
	dment/Reply		Disclosu	ire Statement (IDS)		
ii. 🔲 Affida	vit(s)/Declaration(s)	iv. $oxtimes$ Other $oxtimes$	month E	xtension of Time		
2. Miscellaneous						
a.   Suspension	of action on the abov	e-identified application	is reque	sted under 37 CFR	§1.103(c) for	
· •		suspension shall not exceed	•		• '/	
b. Other				-	· · · · ·	
3. Fees The RCE fee under 37 CFR §1.17(e) is required by 37 CFR §1.114 when the RCE is filed.						
a. 🗵 The Director is hereby authorized to charge the following fees, or credit any overpayments, to						
Deposit Acc						
	ee required under 37	,	11/25/2	003 BABRAHA1 00000119	80780784	
	sion of time fee (37 CF	R §§1.136 and 1.17)			09/09/81	
iii. 🔲 Other		<del></del>	01 FC:1	801	_ 770.00 OP	
	e amount of \$ 880.00					
	credit card (Form PTO-					
WARNING: Information on this form may become public. Credit card information should not						
be included on this form. Provide credit card information and authorization on PTO-2038.						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
Name (Print / Type)	Kenneth L. Sherman, Esc	q.,	Registr	ration No. (Attorney / Agent)	33,783	
Signature			Date	November 17, 2003		
$\geq$						
		CATE OF MAILING OR				
I hereby certify that this co an envelope addressed to: andTrademark	rrespondence is being dep Commissioner For Patent	posited with the United State ts, Boc RCE, Washington, D	s Postal Se C 20231, c	ervice with sufficient post or facsimile transmitted to	age as first class mail in the U.S. Patent	
Name (Print / Type)	Evelyn Menjivar					
Signature	Cillians		Date	November 17, 2003		
Burden Hour Statement: This	form is estimated to take 0.2	naurs to complete. Time will va	ry depending	upon the needs of the indiv	ridual case. Any comments or	

Burden Hour Statement: This form is estimated to take 0.2 refurs to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.